

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
MEDICAL ASSISTANCE ADMINISTRATION  
Olympia, Washington**

**To:** Hospice Agencies  
Managed Care Plans  
CSO Administrators  
Regional Administrators

**Memorandum No:** 02-85 MAA  
**Issued:** December 1, 2002

**For More Information, call:**  
Toll Free: 1-800-562-6188

**From:** Douglas Porter, Assistant Secretary  
Medical Assistance Administration

**Supersedes:** 01-67 MAA

**Subject:** New Rates for Hospice Services

<p><b>Retroactive to dates of service on and after October 1, 2002</b>, the Medical Assistance Administration (MAA) implemented and began using the attached Hospice Fee Schedule.</p>
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Attached are replacement pages 25-28 for MAA's Hospice Billing Instructions, dated May 1999. To obtain this memorandum electronically, go to MAA's website at <http://maa.dshs.wa.gov> (click on the Provider Publications/Fee Schedules link).

Address all reimbursement questions or comments in writing to:

Professional Reimbursement Section  
Division of Budget and Finance  
Medical Assistance Administration  
Department of Social and Health Services  
PO Box 45510  
Olympia, WA 98504-5510

Attachment



# Hospice Revenue Codes

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Enter the following revenue codes and service descriptions in the appropriate form locators.

<b><u>Code #</u></b>	<b><u>Description of Code</u></b>
<b>651</b>	<b><u>Routine Home Care</u></b> - The established rate is a capitated rate regardless of the volume or intensity of routine home care services provided on any given day.
<b>652</b>	<b><u>Continuous Home Care</u></b> - For every hour or part of an hour of continuous care, the hourly rate is reimbursed to the hospice <u>up to 24 hours a day</u> . Bill continuous care as a separate line entry on the UB-92 claim form for each day this level of care is provided.
<b>653</b>	<b><u>Nursing Facility Room and Board</u></b> - Enter the words " <b>Room and Board</b> " in form locator 43. Enter the nursing facility's name or provider number in form locator 83 or in the <b>Remarks</b> form locator.
<b>655</b>	<b><u>Inpatient Respite Care</u></b>  1) MAA will pay for respite care for a <b>maximum of five (5) consecutive days</b> .  2) MAA will deny the <b>entire claim</b> if the hospice agency bills for more than five (5) consecutive days of respite care.  3) Bill MAA for the sixth and subsequent days at the routine home care rate.  4) Itemize the individual days of inpatient respite care services on the <b>UB-92 claim form</b> .  5) <b>If the client dies during the five-day respite period, bill MAA the respite rate for the <u>ending date of service</u>.</b>
<b>656</b>	<b><u>General Inpatient Care</u></b> - Bill the day of discharge from the hospital at the routine home care rate. If the client dies in the hospital, bill MAA the general inpatient rate for the ending date of service.

# Fee Schedule

## Hospice Services Provided Inside Client's Home

<b>Counties (Non-MSA &amp; MSA Areas)</b>	<b>County Code</b>	<b>Routine Home Care (651)</b>	<b>Continuous Home Care Hourly (652)</b>
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### WASHINGTON

#### Non-MSA Areas

Adams, Asotin, Chelan, Clallam, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Grays Harbor, Jefferson, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, San Juan, Skagit, Skamania, Stevens, Wahkiakum, Walla Walla, Whitman	<b>9950</b>	<b>\$120.92</b>	<b>\$29.40</b>
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#### MSA Areas

Benton (Kennewick-Richland)	<b>6740</b>	<b>\$127.19</b>	<b>\$30.93</b>
Clark (Vancouver)	<b>6440</b>	<b>\$128.45</b>	<b>\$31.23</b>
Franklin (Pasco)	<b>6740</b>	<b>\$127.19</b>	<b>\$30.93</b>
Island	<b>7600</b>	<b>\$130.54</b>	<b>\$31.74</b>
King, Snohomish (Seattle-Everett)	<b>7600</b>	<b>\$130.54</b>	<b>\$31.74</b>
Kitsap (Bremerton)	<b>1150</b>	<b>\$125.50</b>	<b>\$30.52</b>
Pierce (Tacoma)	<b>8200</b>	<b>\$132.66</b>	<b>\$32.26</b>
Spokane (Spokane)	<b>7840</b>	<b>\$124.75</b>	<b>\$30.34</b>
Thurston (Olympia)	<b>5910</b>	<b>\$130.44</b>	<b>\$31.72</b>
Whatcom (Bellingham)	<b>0806</b>	<b>\$134.41</b>	<b>\$32.69</b>
Yakima (Yakima)	<b>9260</b>	<b>\$123.91</b>	<b>\$30.13</b>

\* MSA = Metropolitan Statistical Area

## Hospice Services Provided Outside Client's Home

Non-MSA Areas & MSA Areas	Provider Name	Inpatient Respite (655)	General Inpatient Care (656)
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WASHINGTON			
Non-MSA Areas	Assured Home Health & Hospice	\$123.60	\$535.85
	Central Basin Home Health & Hospice	\$123.60	\$535.85
	Central Washington Hospital Hospice	\$123.60	\$535.85
	Community Home Health & Hospice	\$123.60	\$535.85
	Harbors Home Health Services	\$123.60	\$535.85
	Home Care of Kittitas Valley	\$123.60	\$535.85
	Hospice of the Gorge	\$123.60	\$535.85
	Okanogan Regional Hospice	\$123.60	\$535.85
	Tri-State Hospital Hospice	\$123.60	\$535.85
	Walla Walla Community Hospice	\$123.60	\$535.85
	Whitman Home Health & Hospice	\$123.60	\$535.85

### MSA Areas (Counties)

Benton (Kennewick- Richland)	Tri-Cities Chaplaincy	\$128.71	\$561.83
Clark (Vancouver)	Hospice Southwest	\$129.74	\$567.06
King, Snohomish (Seattle-Everett)	Community Health Service	\$131.44	\$575.71
	Evergreen Hospice & Home Health	\$131.44	\$575.71
	Highline Home Health & Hospice	\$131.44	\$575.71
	Hospice of Seattle	\$131.44	\$575.71
	Hospice of Snohomish County	\$131.44	\$575.71
	Swedish Home Health & Hospice	\$131.44	\$575.71
	Visiting Nurse Services of the NW	\$131.44	\$575.71

\* MSA = Metropolitan Statistical Area

## Hospice Services Provided Outside Client's Home (cont.)

Non-MSA Areas & MSA Areas	Provider Name	Inpatient Respite (655)	General Inpatient Care (656)
<b>W A S H I N G T O N</b>			
Kitsap (Bremerton)	Hospice of Kitsap County	\$127.34	\$554.84
Pierce (Tacoma)	Good Samaritan Hospice	\$133.18	\$584.52
	Multicare Hospice of Tacoma	\$133.18	\$584.52
	St. Joseph Hospital Hospice	\$133.18	\$584.52
Spokane (Spokane)	Hospice of Spokane	\$126.73	\$551.75
	Horizon Hospice	\$126.73	\$551.75
Thurston (Olympia)	Providence Sound Home Care	\$131.37	\$575.32
Whatcom (Bellingham)	Skagit Hospice	\$134.60	\$591.78
	Whatcom Hospice	\$134.60	\$591.78
Yakima (Yakima)	Hospice of Yakima	\$126.04	\$548.23
	Lower Valley Hospice	\$126.04	\$548.23
	Memorial Home Care Services	\$126.04	\$548.23
<b>B O R D E R A R E A S</b>			
Multnomah (OR)	Kaiser Permanente Hospice	\$129.74	\$567.06

\* MSA = Metropolitan Statistical Area